

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Ending Spending Action Fund</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489856		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name (Last, First, Middle Initial) of Payee <b>Nahigian Strategies, LLC</b>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 28 / 2012		
Mailing Address 331 Cameron Station Blvd.			Amount <span style="border: 1px solid black; padding: 2px;">4950.00</span>		
City Alexandria State VA Zip Code 22304		Transaction ID : SE.4374			
Purpose of Expenditure media production		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>		Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">260450.00</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶			
Full Name (Last, First, Middle Initial) of Payee <b>Nahigian Strategies, LLC</b>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 28 / 2012		
Mailing Address 331 Cameron Station Blvd.			Amount <span style="border: 1px solid black; padding: 2px;">1650.00</span>		
City Alexandria State VA Zip Code 22304		Transaction ID : SE.4375			
Purpose of Expenditure media production		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>		Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Josh Mandel		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">260450.00</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			<span style="border: 1px solid black; padding: 2px;">6600.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures.....▶			<span style="border: 1px solid black; padding: 2px;"> </span>		
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Nancy H. Watkins</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 28 / 2012</p>					

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(SCHEDULE E)

PAGE 2 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Ending Spending Action Fund</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00489856	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Smart Media Group, LLC</b>			Date MM / DD / YYYY <b>09 / 28 / 2012</b>	
Mailing Address <b>814 King Street</b>			Amount <b>109912.50</b>	
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22314</b>	Transaction ID : <b>SE.4378</b>	
Purpose of Expenditure media placement		Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>OH</b> District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Sherrod Brown</b>			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>260450.00</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Smart Media Group, LLC</b>			Date MM / DD / YYYY <b>09 / 28 / 2012</b>	
Mailing Address <b>814 King Street</b>			Amount <b>77452.50</b>	
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22314</b>	Transaction ID : <b>SE.4379</b>	
Purpose of Expenditure media placement		Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>OH</b> District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Josh Mandel</b>			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>260450.00</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>187365.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	<b>193965.00</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Nancy H. Watkins*

Signature

[Electronically Filed]

Date

MM / DD / YYYY  
**09 / 28 / 2012**